

| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i> | | Docket Number (Optional) TIMI 3.0-003 | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|------------|---|-------------|--|------------|-------------------------|--|--|-------|------|----------|---|-------|-------|----------|---|--------|-------|----------|---|--------|-------|-------------|--|--------|--------|----------|
| Application Number 10/812,349-Conf. #2684 | | Filed March 30, 2004 | | | | | | | | | | | | | | | | | | | | | | | | | |
| For WIRING CIRCUIT BOARD, MANUFACTURING METHOD FOR THE WIRING CIRCUIT BOARD, AND CIRCUIT MODULE | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Art Unit 2814 | | Examiner A. Kalam | | | | | | | | | | | | | | | | | | | | | | | | | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 40%;"></th><th style="width: 20%; text-align: center;"><u>Fee</u></th><th style="width: 20%; text-align: center;"><u>Small Entity Fee</u></th><th style="width: 20%;"></th></tr></thead><tbody><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td style="text-align: center;">\$130</td><td style="text-align: center;">\$65</td><td style="text-align: center;">\$ _____</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td style="text-align: center;">\$490</td><td style="text-align: center;">\$245</td><td style="text-align: center;">\$ _____</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td style="text-align: center;">\$1110</td><td style="text-align: center;">\$555</td><td style="text-align: center;">\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td style="text-align: center;">\$1730</td><td style="text-align: center;">\$865</td><td style="text-align: center;">\$ 1,730.00</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td style="text-align: center;">\$2350</td><td style="text-align: center;">\$1175</td><td style="text-align: center;">\$ _____</td></tr></tbody></table> | | | | | <u>Fee</u> | <u>Small Entity Fee</u> | | <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$130 | \$65 | \$ _____ | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$490 | \$245 | \$ _____ | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1110 | \$555 | \$ _____ | <input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1730 | \$865 | \$ 1,730.00 | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2350 | \$1175 | \$ _____ |
| | <u>Fee</u> | <u>Small Entity Fee</u> | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$130 | \$65 | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$490 | \$245 | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1110 | \$555 | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1730 | \$865 | \$ 1,730.00 | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2350 | \$1175 | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>12-1095</u> . | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I am the <input type="checkbox"/> applicant/inventor. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>54,298</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| _____ /April M. Capati/ Signature | | _____ February 16, 2010 Date | | | | | | | | | | | | | | | | | | | | | | | | | |
| _____ April M. Capati Typed or printed name | | _____ (908) 518-6394 Telephone Number | | | | | | | | | | | | | | | | | | | | | | | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted. | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4). | |
| Dated: February 16, 2010 | Electronic Signature for April M. Capati: /April M. Capati/ |